

PROBATE COURT OF ALLEN COUNTY, OHIO
GLENN H. DERRYBERRY, JUDGE

2017 MAR -9 AM 9:07

ESTATE OF Dianna Joe Gipson

DECEASED

CASE NO. 2017ES96

GLENN H. DERRYBERRY, JUDGE
ALLEN COUNTY, OHIO

APPLICATION FOR SUMMARY RELEASE FROM ADMINISTRATION

[R.C. 2113.031]

Applicant states that decedent died on Feb. 4, 2017

Decedent's domicile was 611 East Ford ave
Street Address

Lima City or Village, or Township if unincorporated area
Allen County

Ohio Post Office State
45801 Zip Code

[Check one of the following]

- The applicant is decedent's surviving spouse entitled to one hundred percent of the allowance for support and decedent's funeral and burial expenses have been prepaid or the surviving spouse has paid or is obligated in writing to pay decedent's funeral and burial expenses and the value of the assets does not exceed the \$40,000 allowance for support under R.C. 2106.13(B) plus and amount not exceeding \$5,000 for decedent's funeral and burial expenses.
- The applicant, who is not the surviving spouse, has paid or is obligated in writing to pay decedent's funeral and burial expenses and the value of the assets is the lesser of \$5,000 or the amount of decedent's funeral and burial expenses.

Attached hereto is a receipt, contract or other document that confirms the applicant's payment or obligation to pay decedent's funeral and burial expenses or if the applicant is the surviving spouse, the prepayment receipt, if applicable.

The decedent's surviving spouse, next of kin, legatees and devisees known to applicant, are listed on attached Form 1.0.

Applicant states that there are no pending proceedings for the administration of the decedent's estate or relief of decedent's estate from administration under R.C. 2113.03.

All known assets with date of death values or the estate are as follows:

- Motor Vehicles (include year, make, model, body type, manufacturer's vehicle identification number and Certificate of Title number)

Dove \$
\$

CASE NO. _____

- Accounts maintained by a Financial Institution (include financial institution name and the account's complete identifying number):
Superior Federal Credit Union 146112 Savings \$ ~~20~~-700⁰⁰ Not exceeded
 _____ \$ _____
 - Stocks and Bonds (include for each stock or bond its serial number, the name of its issuer, the name and address of its transfer agent, and the total number of shares of stocks or bonds):
NONE _____ \$ _____
 - Real estate described in accompanying Form 12.0 Application for Certificate of Transfer and Form 12.1 Certificate of Transfer and date of death value. [Attach verification of value.]
 _____ \$ _____
 - Other assets and date of death values
NONE _____ \$ _____
- Total Assets \$ _____

Applicant requests an order granting summary release.

Attorney for Applicant

Alane Golden
Applicant's Signature

Typed or Printed Name

Alane Golden
Applicant's Typed or Printed Name

Street Address

409 S. Robert's ave
Street Address

City State Zip Code

Lima Ohio 45804
City State Zip Code

Phone Number (include area code)

(567) 242-9186
Phone Number (include area code)

Attorney Registration No. _____

Signed and acknowledged by the applicant in my presence this 9th day of March,
2017.

Linda K. Hook
Notary Public/Deputy Clerk